

COLLECTION BIOGRAPHICAL STATEMENT & CONSENT FORM FORM CA2 INSTRUCTIONS

A. GENERAL INSTRUCTIONS

1. **FILING** – Form(s) CA2 must accompany Form CA1, the Collection Agency Application form. Each individual identified as a *control person* for the *applicant* on Schedule A of Form CA1, must complete Form CA2. Additionally, *applicants* must update the roster of *control persons* on Form CA1 by filing a Schedule C, thus requiring additional CA2 forms.
2. **EMPLOYMENT REPRESENTATION** – The employment representation section must be completed by an authorized representative of the *applicant*.
3. **TERMS USED** – See the following Explanation of Terms section regarding italicized words/phrases.
4. **DATES** – The filing date is the date *applicant* submits this form to the *Department*. The desired effective date is the date *applicant* would like the amendment to become effective.
5. **AMENDMENTS** – The *applicant* must update biographical information by submitting amendments using Form CA2. On Form CA2, circle or otherwise identify the item being amended. Complete only items 1(A) and 1(I), as well as the information that is being amended.

B. FILING INSTRUCTIONS

1. FORMAT

- A. Each individual identified as a *control person* on Schedules A or C must complete Form CA2. A fully completed Form CA2 for each *control person* is required to be submitted along with the *applicant's* initial Form CA1. Form CA2 also accompanies Schedule C when reporting new *control person(s)*.
- B. Type or print all information clearly and legibly.
- C. Use only the current version of Form CA2 or a reproduction of it.
- D. The Acknowledgment & Consent section must include notarized original manual signature.
- E. The Employment Representation section must include original manual signature.
- F. Employment history, item 6: provide the full legal name of the company, beginning with your current employer. For the purposes of this history, include both 1099 independent contractor assignments as well as W-2 status employment.

2. ATTACHMENTS -

- A. Agents of the applicant/licensee who will contact persons in Idaho relative to the business activities of the applicant/licensee will need to file a Form CA4.
- B. Provide written explanations and supporting documents for any "Yes" answer provided in section 8.

C. EXPLANATION OF TERMS – The following terms are italicized throughout Form CA2

1. GENERAL

APPLICANT – The collection agency, debt/credit counselor, debt buyer or credit repair organization applying on or amending information on Form CA1 (including schedules) or Form CA3. The only instance in which the *applicant* is an individual is in the case of a sole proprietorship.

CONTROL – The power, directly or indirectly, to direct the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any *person* that (i) is a director, general partner or executive officer; (ii) directly or indirectly has the right to vote 10% or more of a class of a voting security or has the power to sell or direct the sale of 10% or more of a class of voting securities; (iii) in the case of an LLC, Managing Member; or (iv) in the case of a partnership, has the right to receive upon dissolution, or has contributed, 10% or more of the capital, is presumed to control that company.

CONTROL PERSON – An individual (a natural person) named on Form CA1 in Item 1A or in Schedules A, B, or C that directly or indirectly exercises *control* over the *applicant*.

JURISDICTION – A state, the District of Columbia, the Commonwealth of Puerto Rico, any territory of the United States, or any subdivision or regulatory body thereof.

PERSON – An individual, partnership, corporation, trust, LLC, or other organization.

2. **FOR THE PURPOSE OF ITEM 8**

ENJOINED – Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction, or a temporary restraining order.

FELONY – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *felony* is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

FINANCIAL SERVICES OR FINANCIAL SERVICES-RELATED – Pertaining to securities, commodities, banking, insurance, consumer lending, or real estate (including, but not limited to; acting as or being associated with a bank or savings association, credit union, mortgage lender, mortgage broker, real estate salesperson or agent, closing agent, title company, or escrow agent).

FOREIGN FINANCIAL REGULATORY AUTHORITY – Includes (1) a *financial services* authority of a foreign country; (2) other governmental body empowered by a foreign government to administer or enforce its laws relating to the regulation of *financial services* or *financial services-related* activities; and (3) a foreign membership organization, a function of which is to regulate the participation of its members in *financial services* activities listed above.

FOUND – Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

INVOLVED – Doing an act or omission or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act or omission.

MISDEMEANOR – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *misdemeanor* is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

ORDER – A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an *order*.

PROCEEDING – Includes a formal administrative or civil action initiated by a governmental agency, self-regulatory organization or a *foreign financial regulatory authority*; a *felony* criminal indictment or information (or equivalent formal charge); or a *misdemeanor* criminal information (or equivalent formal charge). The term does not include other civil litigation, investigations, or arrests or similar charges affected in the absence of a formal criminal indictment or information (or equivalent formal charge).

FORM CA2	BIOGRAPHICAL STATEMENT & CONSENT COLLECTION AGENCY APPLICATION FORM					
Date of filing (MM/DD/YYYY): _____ Desired Effective Date (MM/DD/YYYY): _____						
License Number information (if applicable) is optional. Use additional sheets if necessary.	License #	<i>Jurisdiction</i>	License #	<i>Jurisdiction</i>	License #	<i>Jurisdiction</i>
	License #	<i>Jurisdiction</i>	License #	<i>Jurisdiction</i>	License #	<i>Jurisdiction</i>
<input type="checkbox"/> NEW APPLICATION <input type="checkbox"/> AMENDMENT <i>To amend, circle or identify items being amended.</i>						
1. Individual's identifying information: (A) Full last, first and middle names: _____ <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Last Name First Name Full Middle Name Suffix (if any) </div>						
(B) Social Security Number: _____ (C) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female						
(D) Date of Birth (MM/DD/YYYY) _____ (E) State/Province of Birth: _____ (F) Country/Province of Birth: _____						
(G) List all names(s), other than your legal name, you have used or are using, or by which you are or were known since the age of 18. This field should include for example, nicknames, aliases, and names used before or after marriage. (Use additional sheets as necessary). Name _____ Name _____ Name _____ Name _____						
(H) For amendments only: If this filing reports that an individual's name has changed, enter the new name and attach supporting legal documentation: <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Last Name First Name Full Middle Name Suffix (if any) </div>						
(I) Current Employer Name (applicant/licensee): _____						
(J) Office of Employment address: (do not use a P.O. Box) _____ <input type="checkbox"/> If this address is your private residence, check this box. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Number & Street City State / Province & Country Zip+4 / Postal Code </div>						
(K) Current Residence address (if different from employment address): <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Number & Street City State / Province & Country Zip+4 / Postal Code </div>						
(L) Telephone Numbers and e-mail address: <div style="display: flex; justify-content: space-between; margin-top: 10px;"> () _____ Business Phone () _____ Cell Phone (optional) () _____ Fax Line () _____ e-mail address </div>						
2. Individual's Acknowledgment & Consent: I swear or affirm that I have executed this form before a Notary Public, of my own free will and: (A) I have read and understand the items and instructions on this form; (B) My answers (including attachments) are true and complete to the best of my knowledge; (C) I understand that I am subject to administrative, civil or criminal penalties if I give false or misleading answers; (D) I authorize all my current and former <i>employers</i> , law enforcement agencies, and any other <i>person</i> to furnish to any <i>jurisdiction</i> , or any agent acting on its behalf, any information they have, including without limitation my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment and, in the case of former <i>employers</i> , complete reasons for my termination; (E) I have read and understand applicable federal and state law, and will be in compliance at all times; (F) I promise to keep the information contained in this form current and to file accurate supplementary information on a timely basis.						
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <div style="text-align: center; margin-bottom: 10px;"> _____ Date (MM/DD/YYYY) </div> <div style="text-align: center; margin-bottom: 10px;"> Signed or attested before me: _____ Print Notary Public name </div> <div style="text-align: center;"> Notary seal here </div> </div> <div style="width: 45%;"> <div style="text-align: center; margin-bottom: 10px;"> _____ Signature of individual </div> <div style="text-align: center; margin-bottom: 10px;"> by _____ Print individual's name </div> <div style="display: flex; justify-content: space-between;"> <div> on this _____ day of _____, Date </div> <div> at _____ Year State County </div> </div> </div> </div>						

Notary Public signature

Notary Appointment Expires (MM/DD/YYYY)

***Individual's Acknowledgment & Consent must always be completed in full with original, manual signature and notarization.
Affix notary stamp or seal where applicable.***

Applicant full legal name: _____ Individual's full legal name: _____

3. Employer's Representation:

To the best of my knowledge and belief, the *control person* will be familiar with the statutes, regulations, and rules of the *jurisdiction* where this application is being filed, and will be fully qualified for the position for which application is being made herein. I have taken appropriate steps to verify the accuracy and completeness of the information contained in and with this application. I have provided the individual an opportunity to review the information contained herein and the individual has approved this information and signed the form.

_____ by _____
Company Name Signature of authorized party Print Name and Title of authorized party

Employment Representation must always be completed in full with original, manual signature.

4. Fingerprint Information filing representation: (Not required to be filed in Idaho at this time)

☐ I represent that I am submitting, have submitted, or promptly will submit to the appropriate jurisdiction(s) two fingerprint cards as required.

☒ I am applying for a license in a jurisdiction that does not require me to submit fingerprint cards.

5. Residential History: Starting with current address provide all residential addresses over the last ten years. Records must contain a complete ten years history without gaps. (Attach additional sheets as necessary.)

From (MM/YYYY)	To (MM/YYYY)	Street Address	City	State or Province	Zip or Postal Code	Country/ Province

6. Employment History: Provide a complete employment history for the past 10 years. Account for all time including full & part-time employments, self-employment, military service, and homemaking. Also include periods such as unemployed, full-time student, extended travel, etc. Indicate by "YES" or "NO" whether this employment was related to *collection, debt/credit counseling, debt buying, credit repair or any financial service-related business*. Records must contain a complete 10 year history without gaps. (Attach additional sheets as needed.)

From (MM/YYYY)	To (MM/YYYY)	Employer (company name)	Position Held (no abbreviations)	Address/City	State and Postal Code	Country/ Province	YES or NO?

Applicant full legal name: _____

Individual's full legal name: _____

7. Other Business: Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (Please exclude activity that is exclusively charitable, civic, religious, or fraternal and is recognized as tax exempt.) If YES, provide the following details: the name of the other business; whether the business is related to *collection, debt/credit counseling, debt buying, credit repair or any financial service-related business*; the address of the other business; the nature of the other business; your position, title, or relationship with the other business; the start date of your relationship; the approximate number of hours per month you devote to the other business; and briefly describe your duties relating to the other business. (Attach additional sheets as needed.)

Details:

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

8. Disclosures: If the answer to any of the following is "YES," provide complete details of all events or proceedings. Send the details on a separate sheet to the Department together with this application. Remember to file updates to these disclosures as needed.

Financial Disclosure

- (A) Within the past 10 years:
- (1) have you filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition?
- (2) based upon events that occurred while you exercised *control* over any organization, have any filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?
- (B) Has a bonding company ever denied, paid out on, or revoked a bond for you?
- (C) Do you have any unsatisfied judgments or liens against you?

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Criminal Disclosure

- (D) Within the past ten (10) years, have you been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any *felony*?
- (E) Based upon activities that occurred while you exercised *control* over it, has an organization within the past ten (10) years been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any *felony*?
- (F) Have you been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court within the past ten (10) years to a *misdemeanor involving: collection, debt/credit counseling, debt buying, credit repair, OR any financial services-related business; any fraud, false statements, or omissions; any theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or a conspiracy to commit any of these offenses?*
- (G) Based upon activities that occurred while you exercised *control* over it, has an organization within the past ten (10) years been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a *misdemeanor* specified in 8(F)?

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Applicant full legal name: _____ Individual's full legal name: _____

Regulatory Action Disclosure	YES	NO
(H) Has any state or federal regulatory agency or <i>foreign financial regulatory authority</i> within the past ten (10) years: (1) <i>found</i> you to have made a false statement or omission or been dishonest, unfair or unethical?	<input type="checkbox"/>	<input type="checkbox"/>
(2) <i>found</i> you to have been <i>involved</i> in a violation of a <i>collection, debt/credit counseling, debt buying, credit repair, or financial services-related</i> regulation(s) or statute(s)?	<input type="checkbox"/>	<input type="checkbox"/>
(3) <i>found</i> you to have been a cause of a <i>collection, debt/credit counseling, debt buying, credit repair or financial services-related</i> business having its authorization to do business denied, suspended, revoked or restricted?	<input type="checkbox"/>	<input type="checkbox"/>
(4) entered an <i>order</i> against you in connection with a <i>collection, debt/credit counseling, debt buying, credit repair or financial services-related</i> activity?	<input type="checkbox"/>	<input type="checkbox"/>
(5) denied, suspended, or revoked your registration or license, disciplined you, or otherwise by <i>order</i> , prevented you from associating with a <i>collection, debt/credit counseling, debt buying, credit repair or financial services-related</i> business or restricted your activities?	<input type="checkbox"/>	<input type="checkbox"/>
(6) barred you from association with an entity regulated by such commission, authority, agency, or officer, or from engaging in a <i>collection, debt/credit counseling, debt buying, credit repair or financial services-related</i> business?	<input type="checkbox"/>	<input type="checkbox"/>
(7) issued a final <i>order</i> based on violations of any law or regulations that prohibit fraudulent, manipulative, or deceptive conduct?	<input type="checkbox"/>	<input type="checkbox"/>
(I) Have you ever had an authorization to act as an attorney, accountant, or state or federal contractor that was revoked or suspended?	<input type="checkbox"/>	<input type="checkbox"/>
(J) Are you now the subject of any regulatory <i>proceeding</i> that could result in a "yes" answer to any part of 8(H) or 8(I)?	<input type="checkbox"/>	<input type="checkbox"/>
Civil Judicial Disclosure		
(K) (1) Has any domestic or foreign court ever: (a) <i>enjoined</i> you in connection with any <i>collection, debt/credit counseling, debt buying, credit repair or financial services-related</i> activity?	<input type="checkbox"/>	<input type="checkbox"/>
(b) <i>found</i> that you were <i>involved</i> in a violation of any <i>collection, debt/credit counseling, debt buying, credit repair or financial services-related</i> statute(s) or regulation(s)?	<input type="checkbox"/>	<input type="checkbox"/>
(c) dismissed, pursuant to a settlement agreement, a <i>collection, debt/credit counseling, debt buying, credit repair or financial services-related</i> civil action brought against you by a state, federal, or <i>foreign financial regulatory authority</i> ?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Are you named in any pending <i>collection, debt/credit counseling, debt buying, credit repair or financial services-related</i> civil action that could result in a "yes" answer to any part of 8K(1)?	<input type="checkbox"/>	<input type="checkbox"/>
Customer Arbitration/Civil Litigation Disclosure		
(L) Have you ever been named as a respondent/defendant in a <i>collection, debt/credit counseling, debt buying, credit repair or financial services-related</i> consumer-initiated arbitration or civil litigation which:	<input type="checkbox"/>	<input type="checkbox"/>
(1) is still pending; or	<input type="checkbox"/>	<input type="checkbox"/>
(2) resulted in an arbitration award or civil judgment against you, regardless of amount, or that required corrective action; or	<input type="checkbox"/>	<input type="checkbox"/>
(3) was settled for any amount?	<input type="checkbox"/>	<input type="checkbox"/>
Termination Disclosure		
(M) Have you ever voluntarily resigned, been discharged, or permitted to resign after allegations were made that accused you of:	<input type="checkbox"/>	<input type="checkbox"/>
(1) violating statute(s), regulation(s), rule(s), or industry standards of conduct?	<input type="checkbox"/>	<input type="checkbox"/>
(2) fraud, dishonesty, theft, or the wrongful taking of property?	<input type="checkbox"/>	<input type="checkbox"/>